POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		4Y	3/6/01
FORMALITY REVIEW	Sd	355	5/24/01
RESPONSE FORMALITY REVIEW	IDuik	3635'	C/11/01

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

BEST AVAILABLE COPY

Claim Final	Original	Date						
	1	✔	✔					
	2	✔	✔					
	3	✔	✔					
	4							
	5	N	N					
	6	✔	✔					
	7	✔	✔					
	8	O	=					
	9	✔	✔					
	10	✔	✔					
	11	✔	✔					
	12		✔					
	13		N					
	14		N					

(other claim columns 15–150 blank)

If more than 150 claims or 10 actions
staple additional sheet here

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